UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your

Form B 201A, Notice to Consumer Debtor(s)

discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1167 filing fee, \$550 administrative fee: Total fee \$1717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy forms.html#procedure.

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B201B (Form 201B) (12/09)

United States Bankruptcy Court Western District of Virginia

| IN RE: | | Case No |
|----------------------------|-----------|------------|
| Lumpkins, Christopher Alan | | Chapter 13 |
| | Debtor(s) | 1 |

| | F NOTICE TO CONSUMER DEBTOR(S) b) OF THE BANKRUPTCY CODE | |
|---|---|---|
| Certificate of [Non- | Attorney] Bankruptcy Petition Preparer | |
| I, the [non-attorney] bankruptcy petition preparer signification notice, as required by § 342(b) of the Bankruptcy Code | | d to the debtor the attached |
| Printed Name and title, if any, of Bankruptcy Petition P Address: | petition prepared the Social Secur principal, respon | number (If the bankruptcy r is not an individual, state ity number of the officer, asible person, or partner of petition preparer.) |
| X | incipal, responsible person, or | U.S.C. § 110.) |
| C | ertificate of the Debtor | |
| I (We), the debtor(s), affirm that I (we) have received a | nd read the attached notice, as required by § 342(b) of | of the Bankruptcy Code. |
| Lumpkins, Christopher Alan | X /s/ Christopher Alan Lumpkins | 4/28/2015 |
| Printed Name(s) of Debtor(s) | Signature of Debtor | Date |
| Case No. (if known) | X Signature of Joint Debtor (if any) | Date |

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Document

| B1 (Official Form 1) (04/13) | | | | | | | | |
|--|---------------------------------------|---|--|---------------------------------|------------|---|--------------------------------------|---|
| United Sta Western | tes Bankı District (| | | | | | Volu | ıntary Petition |
| Name of Debtor (if individual, enter Last, First, Midd Lumpkins, Christopher Alan | | | 1 | oint Debto | or (Spot | use) (Last, First, | Middle): | |
| All Other Names used by the Debtor in the last 8 year (include married, maiden, and trade names): | rs | | | | | ne Joint Debtor i nd trade names) | | years |
| Last four digits of Soc. Sec. or Individual-Taxpayer I. (if more than one, state all): 9268 | D. (ITIN) /Com | iplete EIN | Last four d | - | | | 'axpayer I.D | . (ITIN) /Complete EIN |
| Street Address of Debtor (No. & Street, City, State & 6410 B Igo Road King George, VA | Zip Code): | | Street Add | ress of Jo | oint Deb | tor (No. & Stree | et, City, Stat | e & Zip Code): |
| | ZIPCODE 22 | 485 | | | | | | ZIPCODE |
| County of Residence or of the Principal Place of Busi Orange | ness: | | County of I | Residence | e or of t | he Principal Pla | ce of Busine | ess: |
| Mailing Address of Debtor (if different from street ad | dress) | | Mailing Ac | ldress of | Joint Do | ebtor (if differer | nt from stree | et address): |
| | ZIPCODE | | _ | | | | Z | ZIPCODE |
| Location of Principal Assets of Business Debtor (if di | fferent from str | eet address ab | ove): | | | | | |
| Type of Dekton | <u> </u> | Nature of B | | | | Chantan of Da | | ZIPCODE Code Under Which |
| Type of Debtor (Form of Organization) | | (Check one | | | | | | Check one box.) |
| (Check one box.) ✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. ☐ Corporation (includes LLC and LLP) ☐ Partnership ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.) | Single As U.S.C. § Railroad Stockbrol | ity Broker | e as defined i | n 11 | Ct | napter 7 napter 9 napter 11 napter 12 napter 13 | Reco Main Chap Reco Nonn | ter 15 Petition for gnition of a Foreign Proceeding ter 15 Petition for gnition of a Foreign main Proceeding |
| | Other | Dank | | | | | Nature of I (Check one | |
| Chapter 15 Debtor Country of debtor's center of main interests: | | Tax-Exempt | | | del | ebts are primaril bts, defined in 1 | y consumer 1 U.S.C. | |
| Each country in which a foreign proceeding by, regarding, or against debtor is pending: | Debtor is Title 26 o | Check box, if a a tax-exempt of the United S Revenue Code) | organization tates Code (tl | | ind per | 101(8) as "incur lividual primaril rsonal, family, o ld purpose." | y for a | |
| Filing Fee (Check one box) | | | | | | pter 11 Debtors | s | |
| Full Filing Fee attached Filing Fee to be paid in installments (Applicable to only). Must attach signed application for the court consideration certifying that the debtor is unable to except in installments. Rule 1006(b). See Official 1 | s pay fee | Debtor is Check if: Debtor's a | a small busing not a small busing ggregate nonco | ousiness d | lebtor as | fined in 11 U.S.s defined in 11 U.S.s defined in 11 U.S.s debts (excluding open ton 4/01/16 and | U.S.C. § 101 | 1(51D). insiders or affiliates) are less |
| Filing Fee waiver requested (Applicable to chapter only). Must attach signed application for the court' consideration. See Official Form 3B. | 7 individuals | Check all ap | pplicable box being filed w | xes: with this point were so | etition | | | |
| Statistical/Administrative Information Debtor estimates that funds will be available for distribution to unsecured creditors. | | | | id, there v | will be n | no funds availab | le for | THIS SPACE IS FOR COURT USE ONLY |
| Estimated Number of Creditors | | | 001- 000 | 25,001- 50,000 | | 50,001- 100,000 | Over 100,000 | |
| | 00,001 to \$10,000 to \$5 | 000,001 \$50 50 million \$10 | 0,000,001 to 00 million | \$100,00 to \$500 | | \$500,000,001 to \$1 billion | More than \$1 billion | |
| Estimated Liabilities | | 000,001 \$50 50 million \$10 | 0,000,001 to 00 million | \$100,00 to \$500 | | \$500,000,001 to \$1 billion | More than | |

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|--|---|--|
| B1 (Official Form 1) (04/13) | | Page |
| Voluntary Petition (This page must be completed and filed in every case) | Name of Debtor(s): Lumpkins, Christopher Ala | n |
| All Prior Bankruptcy Case Filed Within Las | t 8 Years (If more than two, attac | h additional sheet) |
| Location Where Filed: None | Case Number: | Date Filed: |
| Location Where Filed: | Case Number: | Date Filed: |
| Pending Bankruptcy Case Filed by any Spouse, Partner or | Affiliate of this Debtor (If mo | re than one, attach additional sheet) |
| Name of Debtor: None | Case Number: | Date Filed: |
| District: | Relationship: | Judge: |
| Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) Exhibit A is attached and made a part of this petition. | (To be completed whose debts are properties) I, the attorney for the petitioner restant I have informed the petition chapter 7, 11, 12, or 13 of the explained the relief available until the complete of the | if debtor is an individual rimarily consumer debts.) named in the foregoing petition, declare her that [he or she] may proceed under le 11, United States Code, and have der each such chapter. I further certify notice required by 11 U.S.C. § 342(b). |
| | X /s/ Robert Stevens | 4/28/15 |
| Exhi Does the debtor own or have possession of any property that poses or is a | | |
| Yes, and Exhibit C is attached and made a part of this petition. No Exhi (To be completed by every individual debtor. If a joint petition is filed, expected by Exhibit D completed and signed by the debtor is attached and made in this is a joint petition: | ach spouse must complete and atta de a part of this petition. | ch a separate Exhibit D.) |
| Exhibit D also completed and signed by the joint debtor is attached | ed a made a part of this petition. | |
| | days than in any other District. partner, or partnership pending in | this District. |
| or has no principal place of business or assets in the United States I in this District, or the interests of the parties will be served in reg | but is a defendant in an action or pro | oceeding [in a federal or state court] |
| Certification by a Debtor Who Reside (Check all app Landlord has a judgment against the debtor for possession of deb | licable boxes.) | - |
| (Name of landlord the | at obtained judgment) | |
| (Address o | of landlord) | |
| Debtor claims that under applicable nonbankruptcy law, there are the entire monetary default that gave rise to the judgment for post | | |
| ☐ Debtor has included in this petition the deposit with the court of filing of the petition. | any rent that would become due du | uring the 30-day period after the |
| ☐ Debtor certifies that he/she has served the Landlord with this cert | tification. (11 U.S.C. § 362(1)). | |

| B1 (Official Form 1) (04/13) | Page 3 |
|---|---|
| Voluntary Petition (This page must be completed and filed in every case) | Name of Debtor(s): Lumpkins, Christopher Alan |
| Signa | ntures |
| Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed | Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.) |
| under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | ☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached. ☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. |
| X /s/ Christopher Alan Lumpkins | Signature of Foreign Representative |
| Signature of Debtor Christopher Alan Lumpkins X Signature of Joint Debtor | Printed Name of Foreign Representative |
| Telephone Number (If not represented by attorney) | Date |
| April 28, 2015 | |
| Date | |
| Signature of Attorney* | Signature of Non-Attorney Petition Preparer I declare under penalty of perjury that: 1) I am a bankruptcy petition |
| X /s/Robert Stevens Signature of Attorney for Debtor(s) Robert Stevens 501 Grove Ave Charlottesvillle, VA 22902 | preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached. Printed Name and title, if any, of Bankruptcy Petition Preparer |
| April 28, 2015 | Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) |
| Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect. | Address |
| Signature of Debtor (Corporation/Partnership) | |
| I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. | Signature |
| The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. | Date Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above. |
| X Signature of Authorized Individual | Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual: |
| Printed Name of Authorized Individual | If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. A bankruptcy petition preparer's failure to comply with the provisions of title 11 |
| Title of Authorized Individual | and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156. |
| Date | |

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B1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Western District of Virginia

Desc Main

| IN RE: | | Case No. |
|----------------------------|----------|------------|
| Lumpkins, Christopher Alan | | Chapter 13 |
| <u> </u> | ebtor(s) | * |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE CREDIT COUNSELING REQUIREMENT Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities. Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed. 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency. 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed. 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing. 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); Active military duty in a military combat zone. 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district. I certify under penalty of perjury that the information provided above is true and correct.

| Signature of Debtor: /s/ Christopher Alan Lumpkins | Signature of Debtor: | /s/ Christopher Alan Lumpkins | |
|--|----------------------|-------------------------------|--|
|--|----------------------|-------------------------------|--|

Date: **April 28, 2015**

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B7 (Official Form 7) (04/13)

United States Bankruptcy Court Western District of Virginia

| IN RE: | Case No. |
|----------------------------|------------|
| Lumpkins, Christopher Alan | Chapter 13 |
| Debtor(s) | |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101(2),(31).

1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE 0.00 2015: \$26,052 2014: \$73,084

2013: \$68,726

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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None b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than

\$6,255.* If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors

who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER **Wells Fargo Dealer Services** P.O.Box 25341 Santa Ana, CA 92794

Suntrust Bank

PO Box 79041 Baltimore, MD 21279 DATE OF REPOSSESSION. FORECLOSURE SALE.

4/13

TRANSFER OR RETURN

repo of 06 Ford Expedition worth \$6K with \$13K owed

DESCRIPTION AND VALUE

OF PROPERTY

4/13 deed in lieu of foreclosure on former house worth \$190K with \$203 owed - had

short sale fall through

6. Assignments and receiverships

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

None List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

None List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

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10. Other transfers

TOTAL

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

None

vone

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.



15. Prior address of debtor

None If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

3001 Lakeview Parkway, Locust Grove VA 22508 same 9/14-4/08 2117 #26A Cowan Blvd., Fredericksburg VA 22401 same 3/14-9/14 7543 Madison Estates Drive, Mechanicsville VA same 2011-3/14

23111

16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

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| | Case 15-60785 Do | oc 1 Filed 04/28/15 Document | Entered 04/28/15 11:22:23 Page 11 of 48 | Desc Main |
|--------|--|---|--|--|
| None | | | s received notice in writing by a government Indicate the governmental unit, the date of | |
| None | b. List the name and address of every the governmental unit to which the ne | | ded notice to a governmental unit of a release the notice. | of Hazardous Material. Indicate |
| None | | | nts or orders, under any Environmental Law al unit that is or was a party to the proceeding | |
| 18. N | ature, location and name of business | 3 | | |
| None | of all businesses in which the debtor proprietor, or was self-employed in | r was an officer, director, par a trade, profession, or other a hich the debtor owned 5 perco | entification numbers, nature of the businesses tner, or managing executive of a corporation ctivity either full- or part-time within six you ent or more of the voting or equity securities | n, partner in a partnership, sole ears immediately preceding the |
| | | was a partner or owned 5 perc | ntification numbers, nature of the businesses, cent or more of the voting or equity securities | |
| | | was a partner or owned 5 per | ntification numbers, nature of the businesses, cent or more of the voting or equity securities | |
| None | b. Identify any business listed in resp | onse to subdivision a., above, | that is "single asset real estate" as defined in | 11 U.S.C. § 101. |
| [If co | empleted by an individual or indivi | idual and spouse] | | |
| I dec | | nave read the answers contai | ned in the foregoing statement of financia | al affairs and any attachments |
| Date: | April 28, 2015 | Signature /s/ Christoph | - | Christopher Alan Lumpkins |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

0 continuation pages attached

Signature of Joint Debtor (if any)

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B6A (Official Form 6A) (12/07)

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| IN RE Lumpkins, Christopher Alan | Case No. | |
|----------------------------------|------------|--|
| Debtor(s) | (If known) | |

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTORS INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM |
|--------------------------------------|--|---------------------------------------|---|----------------------------|
| None | | | | |
| | | | | |
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TOTAL 0.00

B6B (Official Form 6B) (12/07) IN RE Lumpkins, Christopher Alan

Case 15-60785

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Case No.

(If known)

Debtor(s)

Doc 1

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | TYPE OF PROPERTY | N O | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT |
|-----|---|--------|--|---------------------------------------|--|
| | | N E | | HUSBAND, OR COM | DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
| 1. | Cash on hand. | X | | | _ |
| 2. | Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | accts at BOA | | 500.00 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | | w/ landlord | | 595.00 |
| 4. | Household goods and furnishings, include audio, video, and computer equipment. | | livingroom set, 2 bedrom sets, lamps, dinette set, 2 TVs, lpad, blueray, xbox, kitchen stuff, linens, cleaning supplies, tools | | 2,500.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | | books, pictures, artwork, DVDs | | 100.00 |
| 6. | Wearing apparel. | | clothing | | 400.00 |
| 7. | Furs and jewelry. | | watch | | 10.00 |
| 8. | Firearms and sports, photographic, | | 2 shotguns and bow | | 400.00 |
| | and other hobby equipment. | | handgun | | 400.00 |
| 9. | Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | Х | | | |
| 10. | Annuities. Itemize and name each issue. | X | | | |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | X | | | |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. | Interests in partnerships or joint ventures. Itemize. | X | | | |

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Document

B6B (Official Form 6B) (12/07) - Cont.

IN RE Lumpkins, Christopher Alan

Debtor(s)

_____ Case No. _____

(If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| | | | | | 1 |
|-----|---|------------------|--|---------------------------------------|--|
| | TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
| 15. | Government and corporate bonds and other negotiable and non-negotiable instruments. | Х | | | |
| 16. | Accounts receivable. | X | | | |
| 17. | Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| 19. | Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | | inchoate interest in inheritance property | | 1.00 |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | | interest in 2015 tax refunds (owed this past year) | | 1.00 |
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. | Automobiles, trucks, trailers, and | | 2004 Triumph Daytona | | 4,000.00 |
| | other vehicles and accessories. | | 2010 Mitsubishi Lancer | | 12,000.00 |
| 26. | Boats, motors, and accessories. | X | | | |
| 27. | Aircraft and accessories. | X | | | |
| 28. | Office equipment, furnishings, and supplies. | X | | | |
| | Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| | Inventory. | X | | | |
| | Animals. | X | | | |
| | Crops - growing or harvested. Give particulars. | X | | | |
| | Farming equipment and implements. | X | | | |
| 34. | Farm supplies, chemicals, and feed. | ^ | | | |
| | | | | | |

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B6B (Official Form 6B) (12/07) - Cont.

IN RE Lumpkins, Christopher Alan

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(If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

Debtor(s)

| TYPE OF PROPERTY ON E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|--|--------------------------------------|---------------------------------------|--|
| 35. Other personal property of any kind not already listed. Itemize. | | | |
| not aircady fisted. Refinize. | | | |
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B6C (Official Form 6C) (04/13)

| | IN RE | Lumpkins | , Christopher Alan |
|--|-------|----------|--------------------|
|--|-------|----------|--------------------|

| Case I | No |
|--------|----|
| | |

Debtor(s)

(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under: (Check one box)

Check if debtor claims a homestead exemption that exceeds \$155,675. *

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

| DESCRIPTION OF PROPERTY | SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS |
|---|--------------------------------------|-------------------------------|--|
| SCHEDULE B - PERSONAL PROPERTY | | | |
| accts at BOA | CV § 34-4 | 500.00 | 500.00 |
| w/ landlord | CV § 34-4 | 1.00 | 595.00 |
| livingroom set, 2 bedrom sets, lamps, dinette set, 2 TVs, lpad, blueray, xbox, kitchen stuff, linens, cleaning supplies, tools | CV § 34-26(4a) | 2,500.00 | 2,500.00 |
| books, pictures, artwork, DVDs | CV § 34-4 | 100.00 | 100.00 |
| clothing | CV § 34-26(4) | 400.00 | 400.00 |
| watch | CV § 34-4 | 10.00 | 10.00 |
| 2 shotguns and bow | CV § 34-4 | 400.00 | 400.00 |
| handgun | CV § 34-26(4b) | 400.00 | 400.00 |
| nchoate interest in inheritance property | CV § 34-4 | 1.00 | 1.00 |
| interest in 2015 tax refunds (owed this past year) | CV § 34-4 | 1.00 | 1.00 |
| 2004 Triumph Daytona | CV § 34-26(8) | 1.00 | 4,000.00 |
| | | | |
| | | | |

^{*} Amount subject to adjustment on 4/1/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6D (Official Form 6D) (12/07)

| IN RE Lumpkins, Christopher Alan | Case No. |
|----------------------------------|------------|
| Debtor(s) | (If known) |

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|----------|---------------------------------------|--|------------|----------------|----------|---|------------------------------|
| ACCOUNT NO. 20141200671096 | Х | | 10/14 purchase of 2004 Triumph Daytona | T | | | 4,300.00 | 300.00 |
| Freedom Road Financial 10509 Professional Circle, Ste# 200 Reno, NV 85921 | | | Motorcycle | | | | | |
| | | | VALUE \$ 4,000.00 | | | | | |
| ACCOUNT NO. 455599753 | | | 2/15 purchase of 2010 Mitsubishi Lancer | | | | 13,049.00 | 1,049.00 |
| GM Financial P.O.Box 183834 Arllington, TX 76096 | | | | | | | | |
| | | | VALUE \$ 12,000.00 | | | | | |
| ACCOUNT NO. | | | VALUE \$ | | | | | |
| ACCOUNT NO. | | | | T | T | | | |
| | | | VALUE \$ | | | | | |
| continuation sheets attached | 1 | | (Total of th | | otota | | \$ 17,349.00 | \$ 1,349.00 |
| | | | (Use only on la | | Tota page | | \$ 17,349.00 | \$ 1,349.00 |

(Report also on Summary of Schedules.) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

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B6E (Official Form 6E) (04/13)

| IN RE Lumpkins, Christopher Alan |
|----------------------------------|
|----------------------------------|

Case No.

Debtor(s) (If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on

| the Statistical Summary of Certain Liabilities and Related Data. | |
|---|--|
| Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. | |

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

✓ Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

▼ Taxes and Certain Other Debts Owed to Governmental Units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

2 continuation sheets attached

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B6E (Official Form 6E) (04/13) - Cont.

| IN RE | Lumpkins. | Christopher Alan |
|-------|-----------|------------------|

| Case No | |
|---------|--|
| | |

Debtor(s)

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Domestic Support Obligations (Type of Priority for Claims Listed on This Sheet)

HUSBAND, WIFE, JOINT, OR COMMUNITY UNLIQUIDATED AMOUNT NOT ENTITLED CODEBTOR AMOUNT DISPUTED AMOUNT CREDITOR'S NAME, MAILING ADDRESS DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM ENTITLED INCLUDING ZIP CODE AND ACCOUNT NUMBER. OF CLAIM TO (See Instructions above.) PRIORITY PRIORITY, $IF\,ANY$ ACCOUNT NO. current on ongoing support obligation Jamie Lumpkins 6105 Hawser Drive King George, VA 22485 0.00 ACCOUNT NO. ACCOUNT NO. ACCOUNT NO. ACCOUNT NO. ACCOUNT NO. **1** of **2** continuation sheets attached to Subtotal Schedule of Creditors Holding Unsecured Priority Claims (Totals of this page) (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.) (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)

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B6E (Official Form 6E) (04/13) - Cont.

IN RE Lumpkins, Christopher Alan

ſо. _ Debtor(s)

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Taxes and Other Certain Debts Owed to Governmental Units

(Type of Priority for Claims Listed on This Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM | AMOUNT ENTITLED TO PRIORITY | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---------------|---------------------------------------|---|-------------------------|-----------------------------|----------------------|-----------------------|--------------------------------------|--|
| ACCOUNT NO. 9268 | \dagger | | 2014 Income Tax | \top | | | | | |
| IRS Insolvency Units 400 North 8th Street, Box 76 Richmond, VA 23219-4838 | | | | | | | 1,419.00 | 1,419.00 | |
| ACCOUNT NO. | | | | | | | | | |
| ACCOUNT NO. | | | | | | | | | |
| ACCOUNT NO. | - | | | | | | | | |
| ACCOUNT NO. | | | | | | | | | |
| ACCOUNT NO. | | | | | | | | | |
| Sheet no. 2 of 2 continuation sheets Schedule of Creditors Holding Unsecured Priority | att Cla | ached aims | to (Totals of th | | age | e) | \$ 1,419.00 | \$ 1,419.00 | \$ |
| | | | nedule E. Report also on the Summary of Sch last page of the completed Schedule E. If ap | nedu T | les. Fota | .) al | \$ 1,419.00 | | |
| (Use only on last page of the com | pleto se o | ted Sch | | T nedu T plica | Γota les Γota able | al .) al e, | | | |

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B6F (Official Form 6F) (12/07)

| IN RE Lumpkins, Christopher Alan | | Case No. | |
|----------------------------------|-----------|----------|------------|
| | Debtor(s) | | (If known) |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISTOLED | AMOUNT OF CLAIM |
|---|----------|---------------------------------------|--|------------|--------------|-----------|-----------------------|
| ACCOUNT NO. 104650FW | | | 1/15 HOA dues on home where signed deed in lieu | П | | T | |
| Belmont At Carmel Church Comm.Assoc. C/O ACS West, Inc. AAMC 1904 Byrd Street, Ste# 100 Richmond, VA 23230 | | | | | | | 143.00 |
| ACCOUNT NO. 130442244/009002372066 | | | 2013-2015 Medical | П | | T | |
| Childrens Hospital Of Philadelphia Hospital Billip CHOP Lockbox 7802 P.O.Box 8500 Philadelphia, PA 19178 | | | | | | | 22,900.00 |
| ACCOUNT NO. | | | Assignee or other notification for: | П | | | |
| Childrens Hospital Of Philadelphia Lockbox 6687 P.O.Box 8500 Philadelphia, PA 19178 | | | Childrens Hospital Of Philadelphia | | | | |
| ACCOUNT NO. | | | Assignee or other notification for: | H | | \dagger | |
| Harris & Harris Of Illinois, LTD P.O.Box 8500 Philadelphia, PA 19178 | | | Childrens Hospital Of Philadelphia | | | | |
| 2 continuation sheets attached | | | | Subt | | | 23,043.00 |
| conundation sneets attached | | | (Total of th | _ | ige) otal | 3 | 23,043.00 |
| | | | (Use only on last page of the completed Schedule F. Report | | | | |

the Summary of Schedules and, if applicable, on the Statistical

Summary of Certain Liabilities and Related Data.)

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B6F (Official Form 6F) (12/07) - Cont.

IN RE Lumpkins, Christopher Alan

Debtor(s)

_____ Case No. __

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | (| Continuation Sheet) | | | | |
|---|----------|---------------------------------------|---|----------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | Assignee or other notification for: | T | | H | |
| Amcol Systems 111 Lancewood Rd. Columbia, SC 29210 | | | Childrens Hospital Of Philadelphia | | | | |
| ACCOUNT NO. 32234506 | | | 12/14 Cable | - | | | |
| Cox Communications DEPT. 102424 P.O.Box 1259 Oaks, PA 19456 | | | | | | | 357.00 |
| ACCOUNT NO. | | | Assignee or other notification for: | t | | | |
| Credit Control Corp 11825 Rock Landing Drive P.O.Box 120630 Newport News, VA 23612 | | | Cox Communications | | | | |
| ACCOUNT NO. 9268 | | | 9/14 Penalty/Fine | T | | | |
| EZ Pass Maryland Svc. Ctr. P.O.Box 17600 Baltimore, MD 21297 | | | | | | | |
| ACCOUNT NO. 4613625/1967/7370 | | | 2014 Medical | \vdash | | | 23.00 |
| MCV Physicians 1601 Willow Lawn Drive, Ste#275 Richmond, VA 23298 | | | | | | | 044.00 |
| ACCOUNT NO. | | | Assignee or other notification for: | + | | H | 241.00 |
| United Consumers P.O.Box 4466 Woodbridge, VA 22194 | | | MCV Physicians | | | | |
| ACCOUNT NO. 4622492/4622491/4622491 | | | 2014 Medical | | | | |
| Mcv/VCU Health Systems P.O.Box 758721 Baltimore, MD 21275 | | | | | | | |
| | | | | | | | 851.00 |
| Sheet no. 1 of 2 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of the | - | age |) | \$ 1,472.00 |
| | | | (Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate | t als tatis | tic | n al | \$ |

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B6F (Official Form 6F) (12/07) - Cont.

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IN RE Lumpkins, Christopher Alan

| Case No. |
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| |

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | (| Continuation Sneet) | | | | |
|---|----------|---------------------------------------|--|-------------------|---------------------|---------------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | Assignee or other notification for: | Н | | | |
| Credit Control Corp 11825 Rock Landing Drive P.O.Box 120568 Newport News, VA 23612 | - | | Mcv/VCU Health Systems | | | | |
| ACCOUNT NO. 3721790140 | | | 12/14 Utility | | | | |
| Rappahannock Electric CoOp P.O.Box 7388 Fredericksburg, VA 22404 | | | | | | | 474.00 |
| A COCUMENO 0294722020 | | | 6/08 mortgage - signed deed in lieu so believes no | | | \dashv | 171.00 |
| ACCOUNT NO. 0284732039 Suntrust Bank PO Box 79041 Baltimore, MD 21279 | | | longer liable | | | | 1.00 |
| ACCOUNT NO. 692100399545306 | | | 7/14 Bank Fees | | | | |
| Union First Market Bank P.O.Box 940 Ruther Glen, VA 22546 | - | | | | | | 424.2 |
| ACCOUNT NO. 9280068743 | | | 12/13 purchase of 2006 Ford Expedition - | | | - | 134.00 |
| Wells Fargo Dealer Services P.O.Box 25341 Santa Ana, CA 92794 | | | estimated repo deficiency | | | | |
| ACCOUNT NO. | | | | | | | 8,000.00 |
| ACCOUNT NO. | | | | | | | |
| | | | | | | | |
| Sheet no. 2 of 2 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | - | | (Total of th | Subi | | - 1 | \$ 8,306.00 |
| Schedule of Creations from Honor Chairms | | | (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Related | T also atis | ota o oı tica | ıl n ıl | \$ 32,821.00 |

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B6G (Official Form 6G) (12/07)

| IN RE Lumpkins, Christopher Alan | Case No. |
|----------------------------------|------------|
| Debtor(s) | (If known) |

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

✓ Check this box if debtor has no executory contracts or unexpired leases.

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
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B6H (Official Form 6H) (12/07)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|---|---|
| cichard Lumpkins 012 Holly Hedge Lane ndian Trail, NC 28079 | Freedom Road Financial 10509 Professional Circle, Ste# 200 Reno, NV 85921 |
| | |
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| Fill in this information to id | lentify your case: | | | |
|--|---|---|--|---|
| | | | | |
| Debtor 1 Christopher A | Alan Lumpkins Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court f | for the: Western District of Virginia | | | |
| Case number | | _ | Ched | ck if this is: |
| (If known) | | | A | n amended filing |
| | | | | supplement showing post-petition napter 13 income as of the following date: |
| Official Form 6I | | | M | M / DD / YYYY |
| Schedule I: \ | Your Income | | | 12/13 |
| supplying correct information of the supplying correct information of the supplying supplying the supplying supplying the supplying supp | on. If you are married and not f ir spouse is not filing with you On the top of any additional pa | filing jointly, and you, do not include in | our spouse is living formation about you | Debtor 2), both are equally responsible for with you, include information about your spouser spouse. If more space is needed, attach a r (if known). Answer every question. |
| Fill in your employment information. | | Debtor 1 | | Debtor 2 or non-filling spouse |
| If you have more than one attach a separate page wit information about additional employers. | h Employment status | ✓ Employed✓ Not employ | /ed | Employed Not employed |
| Include part-time, seasona self-employed work. | | Firefighter | | |
| Occupation may Include st or homemaker, if it applies | | <u>i irenginter</u> | | |
| | Employer's name | DOD | - | |
| | Employer's address | 6100 Abbott R Number Street | load | Number Street |
| | | Fort Belvoir, | VA 22060-0000 State ZIP Code | City State ZIP Code |
| | How long employed th | 0 | | State Zir Code |
| | riow rong employed an | iere? <u>11 years</u> | - | |
| Part 2: Give Details | About Monthly Income | | | |
| | | rm. If you have noth | ning to report for any li | ne, write \$0 in the space. Include your non-filing |
| | parated. Duse have more than one emplo Dace, attach a separate sheet to | | ormation for all emplo | yers for that person on the lines |
| , | • | | For Debto | r 1 For Debtor 2 or non-filing spouse |
| | es, salary, and commissions (lonthly, calculate what the month | | ^{2.} \$ 7,131.0 | |
| 3. Estimate and list month | ly overtime pay. | | 3. +\$ <u>0.00</u> | + \$ |
| 4. Calculate gross income. | . Add line 2 + line 3. | | 4. \$ <u>7,131.0</u> | <u>o</u> \$ |

Official Form 6l Schedule 1: Your Income page 1

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Debtor 1

Christopher Alan Lumpkins
First Name Middle Name Last Name

Case number (if known)______

| | | Foi | Debtor 1 | For Debtor 2 or non-filing spouse | |
|--|-----------------------------|----------|------------------|-----------------------------------|-------------------|
| Copy line 4 here | → 4. | \$_ | 7,131.00 | \$ | |
| List all payroll deductions: | | | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$ | 1,633.00 | \$ | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | \$ | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$ | 82.00 | \$ | |
| 5d. Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | |
| 5e. Insurance | 5e. | \$ | 626.00 | \$ | |
| 5f. Domestic support obligations | 5f. | \$ | 0.00 | \$ | |
| | | \$ | 43.00 | \$ | |
| 5g. Union dues 5b. Other deductions Specific Potent Lean (20 x Mag.) | 5g. | | | , | |
| 5h. Other deductions. Specify: Retmt Loan (30 > Mos.) | 5h. | +\$ | 292.00 | + \$ | |
| . Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5 | g +5h. 6. | \$ | 2,676.00 | \$ | |
| Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 4,455.00 | \$ | |
| List all other income regularly received: | | | | | |
| 8a. Net income from rental property and from operating a busines profession, or farm | ss, | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | \$ | 0.00 | \$ | |
| monthly net income. | 8a. | - | | • | |
| 8b. Interest and dividends | 8b. | \$ | 0.00 | \$ | |
| 8c. Family support payments that you, a non-filing spouse, or a de regularly receive | ependent | | | | |
| Include alimony, spousal support, child support, maintenance, divo settlement, and property settlement. | rce 8c. | \$ | 0.00 | \$ | |
| 8d. Unemployment compensation | 8d. | \$ | 0.00 | \$ | |
| 8e. Social Security | 8e. | \$ | 0.00 | \$ | |
| 8f. Other government assistance that you regularly receive | | | | | |
| Include cash assistance and the value (if known) of any non-cash a that you receive, such as food stamps (benefits under the Supplem Nutrition Assistance Program) or housing subsidies. | | \$ | 0.00 | \$ | |
| Specify: | 8f. | | | | |
| 8g. Pension or retirement income | 8g. | \$ | 0.00 | \$ | |
| 8h. Other monthly income. Specify: | 8h. | +\$_ | 0.00 | +\$ | |
| Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | . 9. | \$ | 0.00 | \$ | |
| Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse | e. 10. | \$ | 4,455.00 | + \$ | = \$ <u>4,455</u> |
| State all other regular contributions to the expenses that you list in | | <u> </u> | | | <u> </u> |
| Include contributions from an unmarried partner, members of your hous other friends or relatives. | | | ents, your roor | mmates, and | |
| Do not include any amounts already included in lines 2-10 or amounts t | hat are not a | vailable | e to pay expen | ses listed in Schedule J. | |
| Specify: | | | | 11. | + \$0. |
| Add the amount in the last column of line 10 to the amount in line 10. Write that amount on the Summary of Schedules and Statistical Summary. | | | | • | \$ 4,455.0 |
| while that amount on the <i>Juminary of Juliedules</i> and <i>Statistical Summe</i> | ary or oc italli | LIAUIII | แบง สเาน เกษเสเป | .α <i>D</i> αια, π ιι αμμιισο 12. | Combined |
| | | | | | monthly inc |

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|---------------|-------|----------------|---------------------------|-----------|
| | | Document | Page 28 of 48 | |

| IN RE Lumpkins, Christopher Alan | | Case No. |
|----------------------------------|-----------|----------|
| | Debtor(s) | |

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

Continuation Sheet - Page 1 of 2

Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Debtor has 3 kids and has them about 30-40% of the time. He pays his wife \$1600/mo in child support.

His transportation expenses are high because he commutes to Fort Belvoir for work from King George Co, and he goes to school in Richmond 1 day a week (employer pays the tuition).

Debtor rarely gets overtime. But he did get a small raise recently, and both CMI and Sch I show his income at his new increased level.

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| Fill in this information to identify your case: | | |
|--|--------------------------------------|-------------------------------|
| Debtor 1 Christopher Alan Lumpkins Charlet the | :-: | |
| First Name Middle Name Last Name CTIECK II (III | | |
| Debtor 2 (Spouse, if filing) First Name Middle Name Last Name | ended filing Tement showing post- | natition chanter 13 |
| | es as of the following | |
| Case number MM / DD |) / YYYY | |
| | rate filing for Debtor 2 | |
| Official Form 6J | ns a separate housel | nold |
| Schedule J: Your Expenses | | 12/13 |
| Be as complete and accurate as possible. If two married people are filing together, both are equally reinformation. If more space is needed, attach another sheet to this form. On the top of any additional profit (if known). Answer every question. | | |
| Part 1: Describe Your Household | | |
| 1. Is this a joint case? | | |
| No. Go to line 2. Yes. Does Debtor 2 live in a separate household? | | |
| NoYes. Debtor 2 must file a separate Schedule J. | | |
| 2. Do you have dependents? | Da van danti'a | De se denondent livre |
| Dependent's relationship to Do not list Debtor 1 and Debtor 2. Dependent's relationship to Debtor 1 or Debtor 2 Dependent's relationship to Debtor 1 or Debtor 2 | De pendent's age | Does dependent live with you? |
| Do not state the dependents' | | □ No □ Yes |
| | | □ No |
| | | Yes |
| | | ☐ No☐ Yes |
| | | □ No |
| | | ☐ Yes |
| | | □ No |
| | | │ 山 Yes |
| 3. Do your expenses include expenses of people other than yourself and your dependents? | | |
| Part 2: Estimate Your Ongoing Monthly Expenses | | |
| Estimate your expenses as of your bankruptcy filing date unless you are using this form as a suppler | ment in a Chanter 13 o | rase to report |
| expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box applicable date. | | |
| Include expenses paid for with non-cash government assistance if you know the value of | ., | |
| such assistance and have included it on Schedule I: Your Income (Official Form 6I.) | Your expe | nses |
| The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. | 4. \$ 595 | 5.00 |
| If not included in line 4: | | |
| 4a. Real estate taxes | · - | 00 |
| 4b. Property, homeowner's, or renter's insurance | · · · · · · | 00 |
| 4c. Home maintenance, repair, and upkeep expenses | | 00 |
| 4d. Homeowner's association or condominium dues | 4d. \$ 0. | 00 |

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Debtor 1 Christopher Alan Lumpkins
First Name Middle Name Last Name

Case number (if known)______

| | | | | Yo | ur expenses |
|----|-----|---|------|-----|-------------|
| | 5. | Additional mortgage payments for your residence, such as home equity loans | 5. | \$ | 0.00 |
| | 6. | Utilities: | | | |
| | | 6a. Electricity, heat, natural gas | 6a. | \$ | 150.00 |
| | | 6b. Water, sewer, garbage collection | 6b. | \$ | 0.00 |
| | | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 100.00 |
| | | 6d. Other. Specify: | 6d. | \$ | 0.00 |
| | 7. | Food and housekeeping supplies | 7. | \$ | 500.00 |
| | 8. | Childcare and children's education costs | 8. | \$ | 0.00 |
| | 9. | Clothing, laundry, and dry cleaning | 9. | \$ | 50.00 |
| 1 | 0. | Personal care products and services | 10. | \$ | 0.00 |
| | 1. | Medical and dental expenses | 11. | \$ | 40.00 |
| 1. | 2. | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$ | 500.00 |
| 1 | 3. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$. | 40.00 |
| | 4. | Charitable contributions and religious donations | 14. | \$ | 0.00 |
| 1 | 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | | 15a. Life insurance | 15a. | \$ | 0.00 |
| | | 15b. Health insurance | 15b. | \$ | 0.00 |
| | | 15c. Vehicle insurance | 15c. | \$ | 193.00 |
| | | 15d. Other insurance. Specify: | 15d. | \$ | 0.00 |
| 16 | 6. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Personal Property | 16. | \$ | 30.00 |
| 1 | 7. | Installment or lease payments: | | | |
| | | 17a. Car payments for Vehicle 1 | 17a. | \$ | 306.00 |
| | | 17b. Car payments for Vehicle 2 | 17b. | \$ | 116.00 |
| | | 17c. Other. Specify: | 17c. | \$ | 0.00 |
| | | 17d. Other. Specify: | 17d. | \$ | 0.00 |
| 1 | 8. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). | 18. | \$ | 1,600.00 |
| 1 | 9. | Other payments you make to support others who do not live with you. | | \$ | 0.00 |
| | | Specify: | 19. | Ψ | 0.00 |
| 2 | 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incompany | me. | | |
| | | 20a. Mort gages on other property | 20a. | \$ | 0.00 |
| | | 20b. Real estate taxes | 20b. | \$ | 0.00 |
| | | 20c. Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | | 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | | 20e. Homeowner's association or condominium dues | 20e. | \$ | 0.00 |

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| Debtor | 1 Christop First Name | Middle Name | Last Name | Case number (if known) | | |
|----------------|---|--|--|------------------------|-----|----------|
| 21. O 1 | ther. Specify: See | Schedule Atta | ached | _ 21. | +\$ | 80.00 |
| | our monthly expen e result is your mor | | through 21. | 22. | \$ | 4,300.00 |
| 23. Cal | culate your month | nly net income. | | | | |
| 23a | . Copy line 12 (yo | our combined mo | nthly income) from Schedule I. | 23a. | \$ | 4,455.00 |
| 23b | . Copy your mont | thly expenses fro | m line 22 above. | 23b. | -\$ | 4,300.00 |
| 23c | - | onthly expenses ur <i>monthly net ind</i> | from your monthly income. come. | 23c. | \$ | 155.00 |
| For mo | example, do you entgage payment to | expect to finish pa | use in your expenses within the year and a second s | r do you expect your | | |
| | Yes. None | | | | | |

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IN RE Lumpkins, Christopher Alan

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Continuation Sheet - Page 1 of 1

Other Expenses
Emergencies

60.00

Entered 04/28/15 11:22:23

20.00

Filed 04/28/15

Haircuts

Case 15-60785

Doc 1

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Debtor(s)

Document

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B6 Declaration (Official Form 6 - Declaration) (12/07)

| IN RE | Lumpkins. | Christopher | Alan |
|-------|-----------|-------------|------|

| IN | RE | Lumpkins, | Christopher Alan |
|----|----|-----------|-------------------------|
|----|----|-----------|-------------------------|

Case No.

(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 24 sheets, and that they are true and correct to the best of my knowledge, information, and belief. Signature: /s/ Christopher Alan Lumpkins Date: April 28, 2015 Debtor **Christopher Alan Lumpkins** Signature: (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Social Security No. (Required by 11 U.S.C. § 110.) Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the ___ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

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B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court

Western District of Virginia

| IN RE: | | Case No |
|----------------------------|-----------|------------|
| Lumpkins, Christopher Alan | | Chapter 13 |
| <u> </u> | Debtor(s) | 1 |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|--|----------------------|------------------|--------------|--------------|-------------|
| A - Real Property | Yes | 1 | \$ 0.00 | | |
| B - Personal Property | Yes | 3 | \$ 20,907.00 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | \$ 17,349.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 3 | | \$ 1,419.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 3 | | \$ 32,821.00 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 4 | | | \$ 4,455.00 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 4 | | | \$ 4,300.00 |
| | TOTAL | 22 | \$ 20,907.00 | \$ 51,589.00 | |

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B 6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Western District of Virginia

Desc Main

| IN RE: | | Case No |
|----------------------------|-----------|------------|
| Lumpkins, Christopher Alan | | Chapter 13 |
| <u> </u> | Debtor(s) | |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|----------------|
| Domestic Support Obligations (from Schedule E) | \$ 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | \$ 1,419.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ 0.00 |
| Student Loan Obligations (from Schedule F) | \$ 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | \$ 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | \$ 0.00 |
| TOTAL | \$ 1,419.00 |

State the following:

| Average Income (from Schedule I, Line 12) | \$ 4,455.00 |
|--|----------------|
| Average Expenses (from Schedule J, Line 22) | \$ 4,300.00 |
| Current Monthly Income (from Form 22A-1 Line 11; OR , Form 22B Line 14; OR , Form 22C-1 Line 14) | \$ 7,131.00 |

State the following:

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | \$ 1,349.00 |
|--|----------------|-----------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column. | \$ 1,419.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | \$ 0.00 |
| 4. Total from Schedule F | | \$ 32,821.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | \$ 34,170.00 |

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| Fill in this in | nformation to id | entify your case: | | |
|---------------------------------|---------------------|-----------------------------|-------------|--|
| Debtor 1 | Christopher A | Man Lumpkins Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) |) First Name | MiddleName | Last Name | |
| United States | Bankruptcy Court fo | or the: Western District of | of Virginia | |
| Case number (# known) | | | | |

| Check as directed in lines 17 and 21: |
|--|
| According to the calculations required by this Statement: |
| 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). |
| 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3). |
| 3. The commitment period is 3 years. |
| 4. The commitment period is 5 years. |

☐ Check if this is an amended filing

Official Form 22C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

urate. If

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1:

Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

| | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse |
|--|--|--------------------------|-------------------------|-------------------|--|
| 2. | Your gross wages, salary, tips, bonuses, overtime, and payroll deductions). | I commissions (before al | II | \$7,131.00 | \$0.00 |
| 3. | Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. | | \$0.00 | \$0.00 | |
| 4. | 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. | | \$0.00 | \$0.00 | |
| 5. Net income from operating a business, profession, or farm | | | | | |
| | Gross receipts (before all deductions) | \$0.00 | | | |
| | Ordinary and necessary operating expenses | - \$ <u>0.00</u> | | | |
| | Net monthly income from a business, profession, or farm | 1 C OOO 1 | opy ere → | \$0.00 | \$ 0.00 _ |
| 6. Net income from rental and other real property | | | | | |
| | Gross receipts (before all deductions) | \$ 0.00 | | | |
| | Ordinary and necessary operating expenses | - \$0.00_ | | | |
| | Net monthly income from rental or other real property | \$ 0.00 | opy ere | \$0.00 | \$0.00 |

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Case number (if known)_

Christopher Alan Lumpkins
First Name Middle Name Last Name

Debtor 1

| | | Column A Debtor 1 | Column B Debtor 2 or n on-filing spouse | |
|------------|---|--|--|-------------------------------|
| 7. | Interest, dividends, and royalties | \$ <u>0.00</u> | \$0.00 | |
| 8. | Unemployment compensation | \$ 0.00 | \$0.00 | |
| | Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: $lack \Psi$ | | | |
| | For you\$\$ | | | |
| | For your spouse | | | |
| | Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. | \$0.00 | \$0.00 | |
| | Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c. | | | |
| | 10a | \$ | \$ | |
| | 10b. | \$ | \$ | |
| | 10c. Total amounts from separate pages, if any. | + \$0.00 | +\$0.00 | |
| 11. | Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. | \$7,131.00 | + \$0.00 | = \$7,131.00 Total average |
| | Determine How to Measure Your Deductions from Income | | | |
| 12. | Copy your total average monthly income from line 11. | | | \$7,131.00 |
| 12. | Copy your total average monthly income from line 11 Calculate the marital adjustment. Check one: | | | \$7,131.00 |
| 12. | Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. | | | \$7,131.00 |
| 12. | Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filing with you. Fill in 0 in line 13d. | | | \$7,131.00 |
| 12. | Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. | y paid for the househo | old expenses of you | \$7,131.00 |
| 12. | Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filing with you. Fill in 0 in line 13d. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly or your dependents, such as payment of the spouse's tax liability or the spouse's | y paid for the househo support of someone o | old expenses of you ther than you or | \$7,131.00 |
| 12. | Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filing with you. Fill in 0 in line 13d. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly or your dependents, such as payment of the spouse's tax liability or the spouse's your dependents. In lines 13a-c, specify the basis for excluding this income and the amount of income | y paid for the househo support of someone o | old expenses of you ther than you or | \$7,131.00 |
| 12. | Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filing with you. Fill in 0 in line 13d. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly or your dependents, such as payment of the spouse's tax liability or the spouse's your dependents. In lines 13a-c, specify the basis for excluding this income and the amount of income necessary, list additional adjustments on a separate page. | y paid for the househo support of someone o | old expenses of you ther than you or Irpose. If | \$7,131.00 |
| 12. | Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filing with you. Fill in 0 in line 13d. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly or your dependents, such as payment of the spouse's tax liability or the spouse's syour dependents. In lines 13a-c, specify the basis for excluding this income and the amount of incomnecessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. | y paid for the househo support of someone o ne devoted to each pu | old expenses of you ther than you or Irpose. If | \$7,131.00 |
| 12. | Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filing with you. Fill in 0 in line 13d. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly or your dependents, such as payment of the spouse's tax liability or the spouse's your dependents. In lines 13a-c, specify the basis for excluding this income and the amount of incomnecessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. | y paid for the househo support of someone o ne devoted to each pu | old expenses of you ther than you or Irpose. If | \$7,131.00 |
| 12. | Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filing with you. Fill in 0 in line 13d. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly or your dependents, such as payment of the spouse's tax liability or the spouse's your dependents. In lines 13a-c, specify the basis for excluding this income and the amount of income necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. | y paid for the househo support of someone one devoted to each pu | old expenses of you ther than you or Irpose. If | |
| 12. | Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filing with you. Fill in 0 in line 13d. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly or your dependents, such as payment of the spouse's tax liability or the spouse's your dependents. In lines 13a-c, specify the basis for excluding this income and the amount of incomnecessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. 13a. 13b. 13c. | y paid for the househo support of someone one devoted to each pu | old expenses of you ther than you or irpose. If | |
| 12. | Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filing with you. Fill in 0 in line 13d. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly or your dependents, such as payment of the spouse's tax liability or the spouse's your dependents. In lines 13a-c, specify the basis for excluding this income and the amount of income necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. 13a. 13b. 13c. 13d. Total | y paid for the househo support of someone one devoted to each pu | old expenses of you ther than you or arpose. If | — |
| 12. 13. | Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filing with you. Fill in 0 in line 13d. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly or your dependents, such as payment of the spouse's tax liability or the spouse's your dependents. In lines 13a-c, specify the basis for excluding this income and the amount of income necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. 13a. 13b. 13c. 13d. Total | y paid for the househo support of someone one devoted to each put support of someone one devoted to each put support s | old expenses of you ther than you or irpose. If Copy here. 13d. | — |
| 12. 13. | Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filing with you. Fill in 0 in line 13d. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly or your dependents, such as payment of the spouse's tax liability or the spouse's your dependents. In lines 13a-c, specify the basis for excluding this income and the amount of income necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. 13a. 13b. 13c. 13d. Total | y paid for the househo support of someone one devoted to each put support of someone one devoted to each put support s | old expenses of you ther than you or irpose. If Copy here. 13d. | |

Case 15-60785 Filed 04/28/15 Document Page 38 of 48 **Christopher Alan Lumpkins** Debtor 1 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. Virginia 16b. Fill in the number of people in your household. \$ 66,470.00 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 22C-2). 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 22C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4) 18. Copy your total average monthly income from line 11. **\$** 7,131.00 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13d. 0.00 If the marital adjustment does not apply, fill in 0 on line 19a. 19a Subtract line 19a from line 18. **\$** 7,131.00 19b 20. Calculate your current monthly income for the year. Follow these steps: \$_7,131.00 Multiply by 12 (the number of months in a year). **x** 12 20b. The result is your current monthly income for the year for this part of the form. **\$** 85,572.00 20b 20c. Copy the median family income for your state and size of household from line 16c. 66,470.00 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. //s/ Christopher Alan Lumpkins Signature of Debtor 1 Signature of Debtor 2 Date April 28, 2015 MM / DD / YYYY MM / DD If you checked 17a, do NOT fill out or file Form 22C-2. If you checked 17b, fill out Form 22C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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| Fill in this in | Fill in this information to identify your case: | | | | | |
|--|---|--------------------------|-----------|--|--|--|
| Debtor 1 | Christopher A | Alan Lumpkins Midde Name | Last Name | | | |
| | FIRST Name | Midde Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Midde Name | Last Name | | | |
| United States Bankruptcy Court for the: Western District of Virginia | | | | | | |
| Case number | Case number | | | | | |
| (If known) | | | | | | |
| | | | | | | |
| | | | | | | |

Official Form 22C-2

Chapter 13 Calculation of Your Disposable Income

12/14

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 22C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 22C–1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 22C–1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

5. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$<u>1,053.00</u>

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

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| Debtor 1 | Chri First Nar | stopher Alan Lumpkins ne Middle Name Last Name | | Cas | se number (if known) | | |
|-----------------|-------------------|---|---|-------------------|----------------------|---------------------------------------|--------------------|
| | | | | | | | |
| | People w | ho are under 65 years of age | | | | | |
| | 7a. Out-o | of-pocket health care allowance per perso | n \$ 60.00 | | | | |
| | 7b. Numl | per of people who are under 65 | X2 | _ | | | |
| | 7c. Subto | otal. Multiply line 7a by line 7b. | \$120.00 | Copy line 7c here | \$ <u>120.00</u> | | |
| | People | who are 65 years of age or older | | | | | |
| | 7d. Out-o | of-pocket health care allowance per perso | n \$ 144.00 | | | | |
| | 7e. Numl | per of people who are 65 or older | x 0 | | | | |
| | 7f. Subto | otal. Multiply line 7d by line 7e. | \$0.00 | Copy line 7f here | + \$0.00 | | |
| 7g. ' | Total . Ad | d lines 7c and 7f | | | \$120.00 | Copy total here 7g. | \$ <u>120.00</u> |
| Local Standa | ırds | You must use the IRS Local Standards to | ans wer the questions | s in lines 8-15 | 5. | | |
| | on inforr | nation from the IRS, the U.S. Trustee P | rogram has di vided t | he IRS Loca | l Standard for hou | sing for bankruptcy | purposes |
| ■ Hou | Ising and | utilities – Insurance and operating exputilities – Mortgage or rent expenses | oenses | | | | |
| To ans | wer the o | questions in lines 8-9, use the U.S. Trus separate instructions for this form. Th | | | | | |
| 8. Hou | sing and | utilities – Insurance and operating exp | nenses: Using the num | nber of people | | | \$_503.00 |
| | | ount listed for your county for insurance a | nd operating expenses | . | | | · |
| 9. HOU | 9a. Using | utilities – Mortgage or rent expenses: the number of people you entered in line for your county for mortgage or rent expe | | ount | \$ <u>1,656.00</u> | | |
| | | average monthly payment for all mortgage | | ured by | | | |
| | To ca | alculate the total average monthly paymen actually due to each secured creditor in the ruptcy. Next divide by 60. | it, add all amounts tha ne 60 months after you | tare file for | | | |
| | Name o | of the creditor | Average m ont hly payment | | | | |
| | | | c | | | | |
| | | | э \$ | | | | |
| | | | | | | | |
| | 9b.Total a | average monthly payment | + \$ \$0.00 | Copy line | -\$0.00 | Repeat this amount on line 33a. | |
| | | | | 35 fiele 🌶 | | o., oca. | |
| | Subtract I | age or rent expense. ine 9b (<i>total average monthly payment</i>) fr . If this number is less than \$0, enter \$0. | om line 9a (<i>mortgage</i> | or rent | \$1,656.00 | Copy 9c here→ | \$ <u>1,656.00</u> |
| | | hat the U.S. Trustee Program's division | | | ousing is incorrec | t and affects | \$ <u>0.00</u> |
| uic | Explain w | | | • | | | |
| | | | | | | | |
| | | | | | | , , , , , , , , , , , , , , , , , , , | |

Debtor 1

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Christopher Alan Lumpkins
First Name Middle Name Last Name

Case number (if known)

| _ | 0. Go to I | line 14. | | nber of vehicles for | which you claim a | an ownership c | or operating expense. | |
|--|---|------------------------|--|--|-------------------|-----------------------------------|--------------------------------------|-------------------|
| | | | | al Standards and the or your Census regi | | | you claim the operating ea. | \$_ 277.00 |
| 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for eavehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. | | | | | | | | |
| , | Vehicle 1 Describe Vehicle 1: 2/15 2010 Mitsubishi Lancer | | | | | | | |
| | 13a. Ownersh | nip or leasing | costs using IRS L | _ocal Standard | 13a. | \$5 | 17.00 | |
| | • | | nent for all debts or leased vehicles | secured by Vehicles. | 1. | | | |
| | To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. | | | | | | | |
| | Name of ea | ch creditor for | Vehicle 1 | Average monthly payment | | | | |
| GM Financial \$ 217.48 | | | \$217.48 | Copy13b here→ | - \$21 | Repeat this amount on line 33b. | | |
| 13c. Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. If this number is less | | | | \$0, enter \$0. 13c. | \$29 | Copy net Vehicle 1 expense here → | \$ <u>299.52</u> | |
| , | Vehicle 2 | Describe Vehicle 2: | | | | | | |
| | 13d. Ownersh | nip or leasing o | costs using IRS L | ocal Standard | 13d. | \$ | 0.00 | |
| | • | | nent for all debts or leased vehicles | secured by Vehicle s. | 2. | | | |
| | Name of eac | ch creditor for \ | Vehicle 2 | Average monthly payment | | | | |
| | | | | \$0.00 | Copyhere → | - \$ | O.00 Repeat this amount on line 33c. | |
| | | | ip or lease exper 13d. If this numb | nse per is less than \$0, o | enter \$0. 13f | \$ | Copy net Vehicle 2 expense here | \$ <u>0.00</u> |
| | | | | 0 vehicles in line 1 whether you use p | | | s, fill in the <i>Public</i> | \$ <u>0.00</u> |
| 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for <i>Public Transportation</i> . | | | | | \$ <u>0.00</u> | | | |

Debtor 1

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Case number (if known)_

Christopher Alan Lumpkins

Debtor 1

Other Necessary In addition to the expense deductions listed above, you are allowed your monthly expenses for the Expenses following IRS categories. 16. Taxes: The total monthly amount that you actually pay for federal, state and local taxes, such as income taxes, selfemployment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 \$<u>1,633.00</u> and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. \$ 43.00 Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filling together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life 0.00 insurance other than term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. \$ 1,600.00 Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: 0.00 as a condition for your job, or for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. 0.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. 0.00 Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. 0.00 Do not include payments for basic home telephone, internet or cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Form 22C-1, or any amount you previously deducted. 24. Add all of the expenses allowed under the IRS expense allowances. \$7,184.52 Add lines 6 through 23. Additional Expense These are additional deductions allowed by the Means Test. Deductions Note: Do not include any expense allowances listed in lines 6-24. 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. Health insurance 0.00 Disability insurance 0.00 0.00 Health savings account \$ 0.00 Copy total here 0.00 Do you actually spend this total amount? ■ No. How much do you actually spend? 0.00 26. Continuing contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your 0.00 household or member of your immediate family who is unable to pay for such expenses. 27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. 0.00 By law, the court must keep the nature of these expenses confidential.

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| ebtor ' | Christopher Alan Lumpkin First Name Middle Name | Last Name | Case r | number (if known) | |
|---------|--|---|--|---------------------------------|-----------------------|
| | Additional home energy costs. Your h | ome energy costs are included in yo | our non-mortgage | housing and utilities allowance | |
| | f you believe that you have home energ nousing and utilities allowanœ, then fill | | | duded in the non-mortgage | \$ <u> 0.00</u> |
| | You must give your case trustee docum claimed is reasonable and necessary. | that the additional amount | | | |
| ŗ | Education expenses for dependent closer child) that you pay for your depende elementary or secondary school. | | | | \$ <u>0.00</u> |
| | You must give your case trustee docum reasonable and necessary and not alrea | | id you must expla | ain why the amount claimed is | |
| * | Subject to adjustment on 4/01/16, and | d every 3 years after that for cases b | egun on or after | the date of adjustment. | |
| t | Additional food and clothing expense han the combined food and clothing allowances in the IRS | owances in the IRS National Standar | | | \$ <u> 0.00</u> |
| | To find a chart showing the maximum and nstructions for this form. This chart may | | | in the separate | |
| ` | You must show that the additional amou | nt claimed is reasonable and neces | sary. | | |
| | Continuing charitable contributions. In a struments to a religious or charitable of | | | form of cash or financial | +0.00 |
| [| Do not include any amount more than 1 | 5% of your gross monthly income. | | | |
| 32 | Add all of the additional expense ded | uctions | | | \$0.00 |
| | 32. Add all of the additional expense deductions. Add lines 25 through 31. | | | | |
| Ded | luctions for Debt Payment | | | | |
| | For debts that are secured by an intervehicle loans, and other secured deb | | uding home mo | rtgages, | |
| 7 | Fo calculate the total average monthly psecured creditor in the 60 months after y | ayment, add all amounts that are co | | o each | |
| | | | | Average monthly | |
| | Mantana and a succession bearing | | | payment | |
| | Mortgages on your home | | • | | |
| | 33a. Copy line 9b here | | ₹ | \$ 0.00 | |
| | Loans on your first two vehicles | | | | |
| | 33b. Copy line 13b here | | | \$ <u>217.48</u> | |
| | 33c. Copy line 13e here | | → | \$0.00 | |
| | Name of each creditor for other secured debt | Identify property that secures the debt | Does payment include taxes or insurance? | | |
| | 33d Freedom Road Financial | 2004 Triumph Daytona Motorcycle | M No ☐Yes | \$71.67 | |
| | 33e. GM Financial | Automobile (1) | ∑ No ☐Yes | \$ <u>217.48</u> | |
| | 33f. | | □No □Yaa | + \$ | |
| | 33g. Total average monthly navmen | | Yes | © 289 15 Copy total | ¢ 280 15 |

| | | Document | Page 4 | 4 of 48 | | | |
|--------------------|---|---|--|------------------|-----------------------|-----------------------|------------------|
| btor 1 | Christopher Alan Lum First Name Middle Name | pkins Last Name | | Case num | ber (if known) | | |
| 34. Are ar your | ny debts that you listed in li support or the support of yo | ine 33 secured by your prima our dependents? | ary residence, a | vehicle, or o | ther property neces | sary for | |
| M N | o. Go to line 35. | | | | | | |
| | | u must pay to a creditor, in add | lition to the paym | ents listed in l | ine 33, to keep posse | ssion of | |
| | | cure amount). Next, divide by 6 | | | | | |
| | Name of the creditor | Identify property that secures the debt | Total cure amount | | Monthly cure amoun | t | |
| | | | \$ | ÷ 60 = | \$ | | |
| | | | \$ | _ ÷60 = | \$ | | |
| | | | \$ | _ ÷60 = - | + \$ | | |
| | | | | Total | \$0.00 | Copy total here | \$ <u>0.00</u> |
| 2 Ye | priority claims, such as the | all of these priority claims. Do nose you listed in line 19. | | | \$1,419.00 | ÷60 | \$ <u>23.65</u> |
| | Total amount of all past c | auc priority dairies | | | φ <u>1,419.00</u> | . 00 | Ψ 23.65 |
| 6. Projec | cted monthly Chapter 13 pl | an payment | | | \$ | | |
| of the | United States Courts (for dist | s stated on the list issued by th ricts in Alabama and North Ca Frustees (for all other districts). | arolina) or by the | | | | |
| in the | d a list of district multipliers the separate instructions for this to soffice. | at includes your district, go on form. This list may also be ava | line using the link ailable at the bank | specified | (| | |
| | | | | | \$ | Copy | \$ |
| Avera | ge monthly ad minist rative exp | pense | | L | | 」here → | |
| 7. Add a | Il of the deductions for deb | t payment. Add lines 33g thro | ough 36. | | | | \$ <u>312.80</u> |
| otal Dec | ductions from Income | | | | | | |
| . Add a | II of the allowed deductions | S. | | | | | |
| Conv I | line 24. All of the expenses al | llowed under IRS expense allo | owances | | \$ 7.184.52 | | |

Copy line 24, All of the expenses allowed under IRS expense allowances.....

7,184.52

Copy line 32, All of the additional expense deductions.....

0.00

Copy line 37, All of the deductions for debt payment......+\$ 312.80

Total deductions

\$ 7,497.32 Copy total here

\$_7,497.32

Christopher Alan Lumpkins

Middle Name

Last Name Debtor 1 Case number (if known)_ Part 2 Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) 39. Copy your total current monthly income from line 14 of Form 22C-1, Chapter 13 \$ 7,131.00 Statement of Your Current Monthly Income and Calculation of Commitment Period. 40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 22C-1, that you received in 0.00 accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified 222.00 in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). 7,497.32 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Describe the special circumstances Amount of expense Copy 43d 0.00 43d. Total. Add lines 43a through 43c..... here 👈 0.00 Copy total 44. Total adjustments. Add lines 40 and 43d. 7,719.32 here 🗲 - \$7,719.32 \$-588.32 45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. Part 3: Change in Income or Expenses 46. Change in income or expenses. If the income in Form 22C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 22C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase. Form Reason for change Date of change Increase or Amount of change decrease? ☐ Increase ☐ 22C—1 Decrease 22C-2 22C-1 Increase 22C-2 Decrease ☐ 22C—1 Increase □ 22C-2 Decrease □ 22C-1 Increase 22C-2 Decrease

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| Debtor 1 | Christopher Alan Lumpki First Name Middle Name | Last Name | Case number (if known) |
|--------------------------------|--|--|---|
| Part 4: | Sign Below | | |
| | ere, under penalty of perjury you stopher Alan Lumpkins | udeclare that the information on this statement. | ent and in any attachments is true and correct. |
| | of Debtor 1 | Signature of De | ebtor 2 |
| Date <u>Apı</u> MM / | ril 28, 2015 / DD / YYYY | Date | O /YYYY |

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United States Bankruptcy Court Western District of Virginia

| IN | RE: | Case No |
|----|--|--|
| Lu | ımpkins, Christopher Alan | Chapter 13 |
| | Debtor(s) | |
| | DISCLOSURE OF C | OMPENSATION OF ATTORNEY FOR DEBTOR |
| 1. | | (b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation |
| | For legal services, I have agreed to accept | \$\$\$ |
| | Prior to the filing of this statement I have received | \$ |
| | Balance Due | \$\$2,900.00 |
| 2. | The source of the compensation paid to me was: | tor Other (specify): |
| 3. | The source of compensation to be paid to me is: | tor Other (specify): |
| 4. | I have not agreed to share the above-disclosed compe | nsation with any other person unless they are members and associates of my law firm. |
| | I have agreed to share the above-disclosed compensatogether with a list of the names of the people sharing | tion with a person or persons who are not members or associates of my law firm. A copy of the agreement, in the compensation, is attached. |
| 5. | In return for the above-disclosed fee, I have agreed to reno | er legal service for all aspects of the bankruptcy case, including: |
| | b. Preparation and filing of any petition, schedules, state | rs and confirmation hearing, and any adjourned hearings thereof; |
| 6. | By agreement with the debtor(s), the above disclosed fee of post-confirmation work | oes not include the following services: |
| | | |
| | | CERTIFICATION |
| | certify that the foregoing is a complete statement of any agrorceeding. | eement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy |
| | April 28, 2015 | /s/ Robert Stevens |
| - | Date | Robert Stevens 501 Grove Ave |
| | | Charlottesvillle, VA 22902 |

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United States Bankruptcy Court Western District of Virginia

| IN RE: | | Case No. |
|---------------------------------|--|---|
| Lumpkins, Christopher Alan | | Chapter 13 |
| | Debtor(s) | |
| | VERIFICATION OF CREDITOR MA | TRIX |
| The above named debtor(s) hereb | by verify(ies) that the attached matrix listing cred | itors is true to the best of my(our) knowledge. |
| | | |
| | | |
| Date: April 28, 2015 | Signature: /s/ Christopher Alan Lumpkins | |
| | Christopher Alan Lumpkins | Debtor |
| | | |
| Date: | Signature: | |
| | | Joint Debtor, if any |